

JPW
26118
/a.a.

CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on

6-27-05

Jeffrey R. Klueter

In Re Application of:

Rodriguez et al.

Serial No.: 09/558,556

Filed: April 25, 2000

Confirmation No.: 9533

Group Art Unit: 2611

Examiner: Lonsberry, H.B.

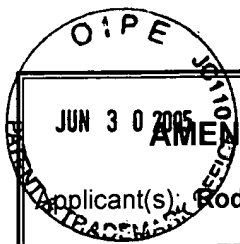
Docket No.: A-5703 (191930-1010)

For: Apparatuses and Methods to Enable the Simultaneous Viewing of Multiple Television Channels and Electronic Program Guide Content

The following is a list of documents enclosed:

Return Postcard
Amendment Transmittal Page
Petition for Extension of Time - 1 month
Fee Transmittal
Credit Card Authorization - Authorizing \$120.00
Response

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

**AMENDMENT TRANSMITTAL LETTER (LARGE)**

JUN 30 2005

Applicant(s): **Rodriguez et al.**

Docket No.

A-5703 (191930-1010)Serial No.
09/558,556Filing Date
April 25, 2000Examiner
Lonsberry, H. B.Confirmation No.
9533Group Art Unit
2611**Invention: Apparatuses and Methods to Enable the Simultaneous Viewing of Multiple Television Channels and Electronic Program Guide Content****Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria VA 22313-1450**

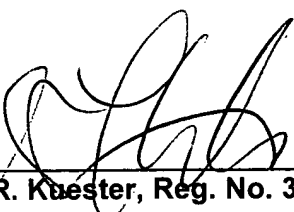
Transmitted herewith is a Response, and a 1 month Petition for Extension of Time in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

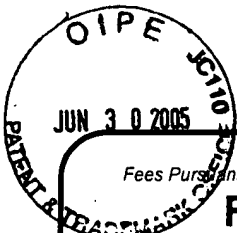
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	36 -	40 =	0	X \$50.00	\$0
INDEP. CLAIMS	7 -	8 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$0
EXTENSION FEE	1 ST MONTH <input checked="" type="checkbox"/> \$120.00	2 ND MONTH <input type="checkbox"/> \$450.00	3 RD MONTH <input type="checkbox"/> \$1,020.00	4 TH MONTH <input type="checkbox"/> \$1,590.00	\$120.00
Other Fees:					\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$120.00

- ☐ No additional fee is required.
- ☐ Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this page is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ A Credit Card Payment Form PTO-2038 is attached in the amount of \$120.00.
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.



Jeffrey R. Kuester, Reg. No. 34,367

Date



Effective on 12/08/2004
Fees Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$120.00)

Complete if Known

Application Number	09/558,556
Filing Date	April 26, 2000
First Named Inventor	Rodriguez et al.
Examiner Name	Lonsberry, Hunter B.
Art Unit	2611
Attorney Docket No.	A-5703 (191930-1010)

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):
- ☐ Deposit Account Deposit Account Number: 20-0778 Deposit Account Name: Thomas, Kayden, Horstemeyer Risley, L.L.P.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments
under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Filing Fees		Search Fees		Examination Fees		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee (\$)	Small Entity Fee(\$)	Fee (\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESSIVE CLAIM FEES

Fee Description		Small Entity Fee(\$)	
Each claim over 20 (including Reissues)		50	25
Each independent claim over 3 (including Reissues)		200	100
Multiple dependent claims		360	180
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
36	-20 or HP = 0	50	0
HP = highest number of total claims paid for, if great than 20			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
8	-3 or HP = 0	200	0
HP = highest number of total claims paid for, if great than 3			
Multiple Dependent Claims		Fee (\$)	Fee Paid (\$)
		360	0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 USC 41(a)(1)(G) and 37 CFR 1.16(s)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =	/50=	(round up to a whole number) x	250 =	0

4. OTHER FEE(S)

	Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	0
Other: 1 month EOT	120.00

SUBMITTED BY

Signature

Registration No. 34,367

Complete (if applicable)

Telephone Number
770-933-9500

Name: (Print/Type)

Jeffrey R. Kuester

Date: 6-27-05